PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART ((Column 1)					(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			2					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			→ minus 20=		* Ø			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS					* Ø			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT	SENT /			Ī	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in colum							L	TOTAL		OR	TOTAL	740
CLAIMS AS AMENDED - PART II											OTHER THAN	
		(Column 1) CLAIMS		(Colui		(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 6	Minus	- 2	20	=		X\$ 9=		OR	X\$18=	
	Independent	NITATION OF M	Minus	###	3 TCLAIM	= *****		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	_					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREV	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL ANA	=	1	X42=		OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF M	JETIPLE DEP	ENDEN	CLAIM		, [+140=		OR	+280=	
TOTAL ADDIT. FEE										OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.	Minus	**		*] [X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T () A114	=	1	X42=		OR	X84≃	
<u></u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						¹	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					er four	nd in the app	ropriate box	in co	lumn 1.	